



**CENTRE FOR SKILL DEVELOPMENT AND INFORMAL EDUCATION (CSDIE)**

**CHHATTISGARH SWAMI VIVEKANANDA TECHNICAL UNIVERSITY, BHILAI**

Sector-8, Old CSVTU Building, Bhilai (CG), 491107, Ph 0788-2261311

**REGISTRATION/APPLICATION FORM**

Name of the Course Applied:

Name of candidate:

Father's Name:

Date of Birth:                      Sex:

Occupation:

Qualification:

Address:

**Paste Passport  
Size Color  
Photograph Here**

Email id:

Phone no.:                              Mobile no.:

Time: Tick whichever is applicable

(A) Batch-I (Morning- 8:00 AM to 10:00 AM

(B) Batch-II (Evening- 6:00 PM to 8:00 PM

**Fee Details:**

Amount:                              DD No.                              Date:

Name of Bank:

(Please write your name and course applied for in the back of DD also)

**Date:**

**Signature**

**Note:**

1. Time/Batch will be allotted as per the convenience of the applicant in general, however candidate may be asked to change the batch as per the requirements of the course.
2. The fee deposited for any course is non-refundable & non-transferrable.
3. Information regarding the classes will be sent through mail/phone after registration.
4. If applicant is in Government service, they need to apply through proper channel.

**For Office Use Only**

Course and Time allotted:

Fee Details:.....

Place & Date:

Signature of CSDIE Coordinator